Case 16-26948 Doc 1 Filed 08/22/16 Entered 08/22/16 17:51:59 Desc Main Document Page 1 of 58

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for	Shantella	
		First name	First name
	example, your driver's	D	
	license or passport).	Middle name	Middle name
	Bring your picture	Palmer	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2743	

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Debtor 1 Shantella D Palmer

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	10028 Holly Ln Apt 2W	If Debtor 2 lives at a different address:			
		Des Plaines, IL 60016 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Shantella D Palmer

ar	Tell the Court About	Your Ba	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are			rief description of each, se go to the top of page 1 and			C. § 342(b) for Individ	luals Filing for Bankruptcy	
	choosing to file under	☐ Chapter 7							
		□ Chapter 11							
		□ Ch	napter 12						
		■ CI	napter 13						
3.	How you will pay the fee		about how yo order. If your a pre-printed	u may pay. Typically, if you attorney is submitting your address.	are paying payment or	the fee yourself, your behalf, your	you may pay with casl r attorney may pay wit	ur local court for more details h, cashier's check, or money th a credit card or check with	
				the fee in installments. I e <i>in Installment</i> s (Official F		e this option, sign	and attach the Applic	ation for Individuals to Pay	
			I request that but is not request that applies to	t my fee be waived (You ruired to, waive your fee, an	nay request d may do so are unable to	o only if your incor o pay the fee in in	me is less than 150% stallments). If you cho	oose this option, you must fill	
				,			, 		
9.	Have you filed for bankruptcy within the last 8 years?	□ No ■ Ye							
	last o years:		J.	Northern Dist of					
			District	Illinois	When	9/24/14	Case number	14-35325	
			District	ilbke	When	9/06/13	Case number	13-35480	
			District		When		Case number		
١٥.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	S.						
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
11.		□ No	. Go to li	ne 12.					
	residence?	■ Ye	s. Has yo	ur landlord obtained an evi	ction judgm	ent against you ar	nd do you want to stay	in your residence?	
				No. Go to line 12.					
			_	Yes. Fill out <i>Initial Stateme</i> bankruptcy petition.	ent About ai	n Eviction Judgme	ent Against You (Form	101A) and file it with this	

Debtor 1 Shantella D Palmer Document Page 4 of 58 Case number (if known)

Part	Report About Any Bu	sinesses `	You Own	as a Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busine	ess			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	& ZIP Code			
	it to this petition.		Checi		o describe your business:			
				Health Care Busines	ss (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Es	state (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as define	ned in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Chapter 11 of the Bankruptcy Code and are you a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist in 11 U.S.C. 1116(1)(B).				small business debtor, you must attach your most recent balance sheet, statement of			
	For a definition of small	■ No.	I am r	not filing under Chapte	r 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankru Code.				
		☐ Yes.	I am f	iling under Chapter 11	and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	ous Property or Any P	Property That Needs Immediate Attention			
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own	■ No. □ Yes.	What is	the hazard?				
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	umber, Street, City, State & Zip Code			

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Debtor 1 Shantella D Palmer

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 58 Case number (if known) Debtor 1 Shantella D Palmer **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Do you estimate that ☐ Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1.000-5.000 25.001-50.000** 1-49 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million **□** \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$500,000,001 - \$1 billion **□** \$0 - \$50,000 □ \$1,000,001 - \$10 million estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shantella D Palmer Shantella D Palmer Signature of Debtor 2 Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on

August 22, 2016

Debtor 1 Shantella D Palmer Document Page 7 of 58 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David H. Cutler	Date	August 22, 2016
Signature of Attorney for Debtor	-	MM / DD / YYYY
David H. Cutler		
Printed name		
Cutler & Associates, Ltd		
Firm name		
4131 Main Street		
Skokie, IL 60076		
Number, Street, City, State & ZIP Code		
Contact phone 847-673-8600	Email address	david@cutlerltd.com
Bar number & State		

			<u>. 111 </u>					
ill in this information to identify your case:								
Debtor 1	Shantella D Palm	er						
	First Name	Middle Name	Last Name					
Debtor 2								
Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number _								

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,701.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,701.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	122,885.00
	Your total liabilities	\$	122,885.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,889.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,587.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersons	ıl family or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Debtor 1 Shantella D Palmer Document Page 9 of 58 Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$	2,458.00
		1 -	

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 16-26948 Doc 1 Filed 08/22/16 Entered 08/22/16 17:51:59 Desc Main Page 10 of 58 Document Fill in this information to identify your case and this filing: Debtor 1 Shantella D Palmer First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put **Toyota** Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Camry Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2002 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 185000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another 2002 Toyota Camary 4 Cil 4dr \$1,500.00 \$1,500.00 SE with 130,000 miles ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes \$1,500.00 pages you have attached for Part 2. Write that number here......>>

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Schedule A/B: Property Official Form 106A/B

page 1

	Case 16-26948 Do	oc 1 Filed 08/22/16 Document	Entered 08/2 Page 11 of 58	22/16 17:51:59	Desc Main
Debtor 1	Shantella D Palmer	Document		Case number (if known)	
■ Yes.	Describe				
	Various use	d household goods and p	ossessions		\$800.00
■ No	les: Televisions and radios; audio including cell phones, camera		pment; computers, pri	nters, scanners; music	collections; electronic devices
8. Collecti Exampl	Describe bles of value es: Antiques and figurines; painting other collections, memorabilis Describe		ooks, pictures, or other	r art objects; stamp, coir	n, or baseball card collections;
Exampl No	ent for sports and hobbies les: Sports, photographic, exercis musical instruments Describe	e, and other hobby equipment;	bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No □ Yes. 11. Clothe Examp	oles: Pistols, rifles, shotguns, ami				
	Various use	ed clothes			\$200.00
□ No ·	bles: Everyday jewelry, costume j		dding rings, heirloom je	ewelry, watches, gems,	-
	Various cos	tume pieces			\$200.00
Examp ■ No □ Yes. 14. Any ot	orm animals oles: Dogs, cats, birds, horses Describe her personal and household ite	ems you did not already list,	ncluding any health	aids you did not list	
	the dollar value of all of your er art 3. Write that number here			you have attached	\$1,200.00
	scribe Your Financial Assets vn or have any legal or equitab	le interest in any of the faller	vina?		Current value of the
Do you ov	vii oi nave any legal of equitable	is interest in any or the foliot	ving:		portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

De	ebtor 1	Shantella D Palmer	Document	Page 12 of 58 Case number (if known)	
16.	■ No	oles: Money you have in your wallet, in you		posit box, and on hand when you file your petition	
17.		its of money bles: Checking, savings, or other financial institutions. If you have multiple acco		s of deposit; shares in credit unions, brokerage houses, and other similar nstitution, list each.	
	_		Institution r	name:	
		17.1. Prepaid	Ready De	ebit \$	1.0
18.	Examp	, mutual funds, or publicly traded stock ples: Bond funds, investment accounts with Institution or iss	n brokerage firms, mo	oney market accounts	
19.	Non-pu			corporated businesses, including an interest in an LLC, partnership),
	☐ Yes.	Give specific information about them Name of entity:		% of ownership:	
20.	Negoti Non-ne	nment and corporate bonds and other nable instruments include personal checks, egotiable instruments are those you cannot Give specific information about them Issuer name:	cashiers' checks, pro	romissory notes, and money orders.	
21.	Examp ■ No	nent or pension accounts ples: Interests in IRA, ERISA, Keogh, 401(List each account separately.	k), 403(b), thrift savino	ngs accounts, or other pension or profit-sharing plans	
	ш 163.	Type of account:	Institution r	name:	
22.	Your s Examp ■ No		ent, public utilities (ele	entinue service or use from a company ectric, gas, water), telecommunications companies, or others name or individual:	
23		ies (A contract for a periodic payment of n			
20.	■ No □ Yes			of the of for a findinger of years)	
24.	Interest	,		rogram, or under a qualified state tuition program.	
	☐ Yes	Institution name and descri	otion. Separately file t	the records of any interests.11 U.S.C. § 521(c):	
25.	■ No	equitable or future interests in propert. Give specific information about them	y (other than anythir	ing listed in line 1), and rights or powers exercisable for your benef	it
26.	Patents	s, copyrights, trademarks, trade secrets bles: Internet domain names, websites, pro			

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

De	ebtor 1	Shantella D Palmer	Document	Page 13 of 58	8 Case number <i>(if known)</i>	
27.	Exam _l ■ No	es, franchises, and other general intangoles: Building permits, exclusive licenses,	gibles cooperative associatio	n holdings, liquor lice	enses, professional licenses	
	☐ Yes.	Give specific information about them				
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	funds owed to you				
	☐ Yes.	Give specific information about them, incl	uding whether you alre	eady filed the returns	and the tax years	
29.	Exam _i ■ No	support bles: Past due or lump sum alimony, spous	sal support, child supp	ort, maintenance, div	vorce settlement, property se	ettlement
30.		amounts someone owes you bles: Unpaid wages, disability insurance pa benefits; unpaid loans you made to s	ayments, disability ber omeone else	efits, sick pay, vacat	ion pay, workers' compensa	ation, Social Security
	☐ Yes.	Give specific information				
31.	Interes Examp ■ No	sts in insurance policies bles: Health, disability, or life insurance; he	ealth savings account	(HSA); credit, homeo	wner's, or renter's insurance	3
	☐ Yes.	Name the insurance company of each pol Company name:	icy and list its value.	Benefici	iary:	Surrender or refund value:
32.	If you	terest in property that is due you from sare the beneficiary of a living trust, expect one has died.			re currently entitled to receiv	e property because
	■ No	Give specific information				
	□ res.	Give specific information				
33.		against third parties, whether or not your against third parties, whether or not your against third parties, insured against third parties, whether or not you			d for payment	
		Describe each claim				
34.	Other	contingent and unliquidated claims of e	every nature, includir	ng counterclaims of	the debtor and rights to s	et off claims
		Describe each claim				
35.	Any fin	nancial assets you did not already list				
		Give specific information				
36		the dollar value of all of your entries fro art 4. Write that number here			-	\$1.00
Pa	rt 5: De	scribe Any Business-Related Property You Ov	wn or Have an Interest Ir	n. List any real estate ir	n Part 1.	
37.	Do you o	own or have any legal or equitable interest in a	any business-related pro	pperty?		
	No. Go	to Part 6.				
- 1	☐ Yes. 0	Go to line 38.				

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Case number (if known) Document Debtor 1 Shantella D Palmer Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$1,500.00 57. Part 3: Total personal and household items, line 15 \$1,200.00 58. Part 4: Total financial assets, line 36 \$1.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$2,701.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,701.00

\$2,701.00

	Cas	SC 10-20340 DUC	Document		Page 15 of 58	39 D	esc Main
Fill	l in this inform	ation to identify your case			nuc 15 (ii 50)		
De	btor 1	Shantella D Palmer					
		First Name	Middle Name	L	ast Name		
	btor 2 ouse if, filing)	First Name	Middle Name	L	ast Name		
Un	ited States Ban	kruptcy Court for the: NC	RTHERN DISTRICT OF	ILLIN	OIS		
011	nea claics ban	Truptoy Court for the.	THE THE PROPERTY OF				
	se number					П	Check if this is an
							amended filing
\frown f	ficial Ear	m 106C					
	<u>fficial For</u>		01				
50	chedule	C: The Prop	erty You Cla	aim	as Exempt		4/16
he nee	property you lis	ted on Schedule A/B: Prope attach to this page as many	erty (Official Form 106A/B) as y	other, both are equally responsible for our source, list the property that you age as necessary. On the top of any	claim as e	xempt. If more space is
spe any un exe	cific dollar am applicable sta ds—may be un mption to a pa	ount as exempt. Alternativ tutory limit. Some exempt Ilimited in dollar amount. I	rely, you may claim the ions—such as those fo However, if you claim ar	full fa r heal n exei	ount of the exemption you claim. Our claim of the property being the aids, rights to receive certain be the property of the aids, rights to receive certain be the property of 100% of fair market valudetermined to exceed that amount	ng exemp enefits, an e under a	ted up to the amount of ad tax-exempt retirement law that limits the
Pa	it 1: Identify	the Property You Claim a	s Exempt				
		• •	•	en if v	our spouse is filing with you.		
	_		,	•	, ,		
	_	iming state and federal nonk	. , .	11 U.	5.C. § 522(D)(3)		
		iming federal exemptions.					
2.	For any prope	erty you list on Schedule A	/B that you claim as ex	empt,	fill in the information below.		
		n of the property and line on nat lists this property	Current value of the portion you own Copy the value from	portion you own			ws that allow exemption
	Various use	d household goods on	Schedule A/B			725 II C	S E/42 4004/b)
	possessions	d household goods and s	\$800.00		\$800.00	735 ILC	S 5/12-1001(b)
	Line from Sche	edule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Various use		\$200.00		\$200.00	735 ILCS	6 5/12-1001(a)
	Line from Sche	edule A/B: 11.1	<u>.</u>		100% of fair market value, up to any applicable statutory limit		
	Various cos	tume pieces	\$200.00	_	\$200.00	735 ILCS	S 5/12-1001(b)
		edule A/B: 12.1	Ψ200.00				
					100% of fair market value, up to any applicable statutory limit		
	Prepaid: Rea	ady Debit edule A/B: 17.1	\$1.00		\$1.00	735 ILC	5 5/12-1001(b)
					100% of fair market value, up to any applicable statutory limit		
3.	(Subject to adj		ery 3 years after that for ca	ases f	illed on or after the date of adjustmer	,	

□ No □ Yes

Official Form 106C

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Debtor 1 Shantella D Palmer

Fill in this information to identify your case:						
Debtor 1	Shantella D Palm	er				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Case 10-20940 L	Document		8 of 58	Desc Main
Fill in this i	nformation to identify your		1 000. 1	0 01 30	
Debtor 1	Shantella D Palme				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	r) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS		
Case numbe	er				
(if known)					☐ Check if this is an
					amended filing
Official E					
	Form 106E/F	U. a. I.I.a a. I.I.a. a. a. a	! Ol-:		40/45
	e E/F: Creditors W				12/15 RIORITY claims. List the other party to
): Creditors V he Continuati umber (if kno	Vho Have Claims Secured by Proion Page to this page. If you have	operty. If more space is needed e no information to report in a I	, copy the Part you	u need, fill it out, number the e	ured claims that are listed in Schedule entries in the boxes on the left. Attach tional pages, write your name and case
	reditors have priority unsecured				
	o to Part 2.	olamo agamot you.			
■ No. G	0 10 Part 2.				
	ist All of Your NONPRIORIT	V Unsecured Claims			
	reditors have nonpriority unsec				
_ `					
□ No. Ye	ou have nothing to report in this pa	irt. Submit this form to the court w	vith your other sche	dules.	
Yes.					
claim, list		aim. For each claim listed, identify	y what type of claim	it is. Do not list claims already i	has more than one nonpriority unsecured included in Part 1. If more than one the Continuation Page of Part 2.
					Total claim
	celerated Financial	Last 4 digits of	account number	6989	<u>\$518.00</u>
	priority Creditor's Name Monette Pkwy	When was the o	debt incurred?	Opened 8/01/12	
	ithfield, VA 23430	When was the C	debt illculred :	Opened 6/01/12	
	ber Street City State ZIp Code	As of the date y	ou file, the claim i	s: Check all that apply	
Who	incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only		RIORITY unsecured	d claim:	
	At least one of the debtors and ano				
	Check if this claim is for a comn e claim subject to offset?	nunity debt		ration agreement or divorce that	t you did not
	No			g plans, and other similar debts	
·			Collection	Attorney Aarons Sales	
	'es	Other. Specif	fy Lease	.,	

Best Case Bankruptcy

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Debtor 1 Shantella D Palmer Case number (if know) 4.2 Accont Recovery Service Last 4 digits of account number 1955 \$1,308.00 Nonpriority Creditor's Name 3031 N. 114th At. When was the debt incurred? Milwaukee, WI 53222 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 08 Tcfbank092 00201 Other. Specify 4.3 Afni, Inc. Last 4 digits of account number 9319 \$153.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 1/01/12 Po Box 3097 Bloomington, IL 61702 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Factoring Company Account Sage Telco Other. Specify 4.4 **Armed Forces Bank** Last 4 digits of account number \$716.00 Nonpriority Creditor's Name PO Box 26744 When was the debt incurred? Kansas City, MO 64196 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Checking Account ☐ Yes

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Debto	Snantella D Palmer		Case number (if know)	
4.5	BMO Harris Financial Advisors, Inc.	Last 4 digits of account number		\$1,367.00
	Nonpriority Creditor's Name Attention: BHFA Operations, MC-7 WM	When was the debt incurred?		
	111 E Kilbourn Ave, Suite 200 Milwaukee, WI 53202			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Continues		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	_		
			_	
4.6	Cbe Group	Last 4 digits of account number	5647	\$389.00
	Nonpriority Creditor's Name 1309 Technology Pkwy Cedar Falls, IA 50613	When was the debt incurred?	Opened 10/01/11	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Continuent		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
	☐ At least one of the debtors and another	Student loans	d Claim.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	·	Attorney Comed Residential R	
	☐ Yes	Other. Specify Collection	Attorney Comed Residential R	
4.7	Chicago County Department	Last 4 digits of account number	1862	\$175.00
	Nonpriority Creditor's Name POBox 641547 Chicago, IL 60664	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_	,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	<u> </u>	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other Specify Tickets		

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Debtor 1 Shantella D Palmer Case number (if know) 4.8 Cit y of Chicago Last 4 digits of account number \$5,700.00 Nonpriority Creditor's Name **Dept. of Business Affairs** When was the debt incurred? 121 N LaSalle St. Rm 800 Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify #10007, #745709, #2476508 ☐ Yes 4.9 **Comenity Bank** Last 4 digits of account number \$484.00 Nonpriority Creditor's Name **Recovery Department** When was the debt incurred? **POBOX 182125** Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacktriangle Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes 4.10 **Comenity Bank** Last 4 digits of account number \$175.00 Nonpriority Creditor's Name When was the debt incurred? 4590 E. Broad St. Columbus, OH 43213 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection

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Debtor 1 Shantella D Palmer Case number (if know) 4.11 Contract Callers, Inc. Last 4 digits of account number 8703 \$390.00 Nonpriority Creditor's Name 501 Greene Street, 3rd Floor When was the debt incurred? Opened 10/01/12 Suite 302 Augusta, GA 30901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Comed 26499 ☐ Yes 4.12 **Elk Grove Rural** \$495.00 Last 4 digits of account number Nonpriority Creditor's Name **POBOX 88850** When was the debt incurred? Carol Stream, IL 60188 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.13 Harris & Harris Last 4 digits of account number 3440 \$1,515.00 Nonpriority Creditor's Name 111 W. Jackson Blvd, Suite 400 When was the debt incurred? Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Collection ☐ Yes

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1 Shantella D Palmer	Case number (if know)	
Illinois Dept. of Employment Securi	Last 4 digits of account number	\$14,500.00
Nonpriority Creditor's Name PO Box 6996	When was the debt incurred?	
Chicago, IL 60606-6996		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Benefit overpayments	
Jcitron Law	Last 4 digits of account number 2743	\$4,854.00
Nonpriority Creditor's Name 120 W Madison St	When was the debt incurred?	
Chicago, IL 60602	Their was the debt mounted:	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	■ Other. Specify 09 Preston Higgins	
	— Other. Specify	
Midland Funding Nonpriority Creditor's Name	Last 4 digits of account number 2438	\$864.00
8875 Aero Dr Ste 200 San Diego, CA 92123	When was the debt incurred? Opened 9/01/09	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
lacksquare At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Factoring Company Account Salute Visa Other Specify Gold	

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Debtor 1 Shantella D Palmer Case number (if know) 4.17 **National Credit Adjusters** Last 4 digits of account number \$262.00 Nonpriority Creditor's Name PO Box 3023 When was the debt incurred? Hutchinson, KS 67504-3023 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.18 **National Credit Solutions** Last 4 digits of account number \$790.00 Nonpriority Creditor's Name 3680 E I-240 SVC Rd. When was the debt incurred? Oklahoma City, OK 73135 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Zone Fitness ☐ Yes 4.19 Nco Financial Systems, Last 4 digits of account number 8800 \$7,000.00 Nonpriority Creditor's Name 600 Holiday Plaza Dr Ste When was the debt incurred? Opened 12/01/12 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Illinois State Toll Hwy ☐ Yes ■ Other. Specify Author. #10007, #745709, #2476508

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Debtor 1 Shantella D Palmer Case number (if know) 4.20 **New Age Furniture** Last 4 digits of account number \$1.940.00 Nonpriority Creditor's Name Att. Bk Dept When was the debt incurred? 4238 S Cottage Grove Chicago, IL 60653 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.21 **OverInd Bond** 5769 \$6,000.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 4/02/11 Last Active 4701 W. Fullerton Ave. When was the debt incurred? 1/14/13 Chicago, IL 60639 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No 2002 Toyota Camry 185000 miles 2002 Toyota Camary 4 Cil 4dr SE with ☐ Yes Other. Specify 130,000 miles 4.22 **Penn Credit** Last 4 digits of account number 9634 \$297.00 Nonpriority Creditor's Name 916 S 14th St. When was the debt incurred? Harrisburg, PA 17108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

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Snantella D Palmer	Case number (if know)				
Penn Credit	Last 4 digits of account number 4334	\$285.00			
POBox 1259 Dept. 91047	When was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one. Debtor 1 only	☐ Contingent				
Debtor 2 only					
Debtor 1 and Debtor 2 only	•				
_					
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
•	·····				
Yes	Other. Specify Collection				
Portfolio Recovery Nonprigrity Creditor's Name	Last 4 digits of account number 9681	\$500.00			
Attn: Bankruptcy Po Box 41067	When was the debt incurred? Opened 11/01/09				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only					
☐ Debtor 2 only					
☐ Debtor 1 and Debtor 2 only	·				
☐ At least one of the debtors and another	<u></u>				
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Financial Network Natl B				
Portfolio Recovery Associates LLC	Last 4 digits of account number	\$0.00			
POBox 12914	When was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only					
☐ Debtor 2 only					
☐ Debtor 1 and Debtor 2 only	·				
\square At least one of the debtors and another	☐ Student loans				
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Collection for WWFN				
	Penn Credit Nonpriority Creditor's Name POBox 1259 Dept. 91047 Oaks, PA 19456 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Portfolio Recovery Nonpriority Creditor's Name Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Check if this claim is for a community debt is the claim subject to offset? No Yes Portfolio Recovery Associates LLC Nonpriority Creditor's Name POBox 12914 Noflok, VA 23541 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt is the claim subject to offset? Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? No Check if this claim is for a community debt is the claim subject to offset? No	Nonprotry Creditor's Name POBOx 1259 Popt. 91047 Oaks, PA 19456			

Document Page 27 of 58 Debtor 1 Shantella D Palmer Case number (if know) 4.26 Salute/utb Last 4 digits of account number 5191 \$697.00 Nonpriority Creditor's Name **Card Services** Opened 10/01/07 Last Active Po Box 105555 When was the debt incurred? 3/21/08 Atlanta, GA 30348 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.27 \$399.00 **South Shore Hospital** Last 4 digits of account number Nonpriority Creditor's Name 8012 S Crandon When was the debt incurred? Chicago, IL 60617 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.28 The Illinois Tollway Last 4 digits of account number \$70,363.00 Nonpriority Creditor's Name 2700 Ogden Ave. When was the debt incurred? **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset?

■ No

☐ Yes

■ Other. Specify Tolls

☐ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Shantella D Palmer Case number (if know) 4.29 True Accod Last 4 digits of account number \$250.00 Nonpriority Creditor's Name 153 Maiden Lane, Third Floor When was the debt incurred? San Francisco, CA 94108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.30 Wfnnb \$499.00 Last 4 digits of account number Nonpriority Creditor's Name Attention: Bankruptcy When was the debt incurred? Po Box 182685 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify In collection with Portfolio ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? City of Chicago Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bureua of Parking Bk** ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 88292 Chicago, IL 60680 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Illinois Secretary of State Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 213 State Capitol Springfield, IL 62756 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Markoff Krasny Line 4.21 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims 29 N Wacker Dr. #550 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60606 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **WFNNB** Line 4.30 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Bk Dept. Part 2: Creditors with Nonpriority Unsecured Claims

120 Corporate Blvd. Ste. 1

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Debtor 1 Shantella D Palmer

Case number (if know)

Norfolk, VA 23502

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims	_			
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 122,885.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 122,885.00

		DUGUITIE	III FAUE SU UI SO	
Fill in this infor	mation to identify your	case:		
Debtor 1	Shantella D Palm	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Fill in this	information to identify your	Document case:	Page 31 of	58
Debtor 1	Shantella D Palm	er		
200101 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name	
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case numl (if known)	ber			☐ Check if this is an amended filing
	l Form 106H I <mark>ule H: Your Cod</mark>	ebtors		12/15
eople are ill it out, a our name	filing together, both are equ nd number the entries in the and case number (if known	ially responsible for supplying boxes on the left. Attach the	ng correct informatio e Additional Page to	complete and accurate as possible. If two married n. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write
'	you navo any obabbiolor (ii	you are ming a joint case, as i	iot not olition opouco a	o a coassis.
■ No □ Yes				
		u lived in a community propo , Nevada, New Mexico, Puerto		(Community property states and territories include ton, and Wisconsin.)
	Go to line 3. Did your spouse, former spo	use, or legal equivalent live wi	th you at the time?	
in line Form	2 again as a codebtor only	if that person is a guarantor	or cosigner. Make su	your spouse is filing with you. List the person shown ire you have listed the creditor on Schedule D (Officia G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line ☐ ☐ ☐ Schedule G, line ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
-	Number Street			

State

City

ZIP Code

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Fill	in this information to identify your	case:				1			
	otor 1 Shantella D								
	otor 2 buse, if filing)								
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number 					Check if this is: An amende A supplementation	d filing ent showi	ng postpetition	
O.	fficial Form 106I					MM / DD/ Y		Tonowing date.	
	chedule I: Your Inc	ome				IVIIVI / DD/ T	111		12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and yo	our spouse iclude infor	is li mati	ving with you, incl	ude info ouse. If r	rmation abou more space is	t your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed□ Not employed	ed		☐ Emplo	•		
		Occupation	Nurse Aid						
	Include part-time, seasonal, or self-employed work.	Employer's name	Lutheran Ho	mes					
	Occupation may include student or homemaker, if it applies.	Employer's address	800 E Oaktor Arlington He		000	4			
		How long employed to	here? 2 we	eks					
Par	t 2: Give Details About Mo	nthly Income							
spou If yo	mate monthly income as of the cuse unless you are separated. u or your non-filing spouse have m	ore than one employer, co	, ,	·			·	·	ŭ
more	e space, attach a separate sheet to	o this form.				For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			. 2.	\$	2,503.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	2,503.00	\$	N/A	

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Debto	or 1	Shantella D Palmer		Case r	number (if known)			
				For	Debtor 1	For Deb	tor 2 or	
	Сор	y line 4 here	4.	\$	2,503.00	\$	N/A	
5.	l ist	all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	228.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$-	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$-	0.00	\$	N/A	
	5e.	Insurance	5e.	\$_	17.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	245.00	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,258.00	\$	N/A	
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c. 8d. 8e.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	\$ \$	0.00 0.00 0.00	\$ \$ \$	N/A N/A N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: SSI for son	e 8f.	\$	631.00	\$	N/A	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	631.00	\$	N/A	
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$	•	2,889.00 + \$	N	/A = \$	2,889.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						2,000.00
11.	State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00							
		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaies				a, if it	2. \$	2,889.00
							Combine	
13.	Do y ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monthly	income

Official Form 106I Schedule I: Your Income page 2

	io thio i nforma	tion to identify	0.UK 0.000			1		
		ition to identify y						
Debt	tor 1	Shantella D	Palmer				ck if this is:	
Debt	tor 2					_	An amended filing A supplement show	wing postpetition chapter
(Spo	ouse, if filing)					_	13 expenses as of	the following date:
Unite	ed States Bankr	uptcy Court for the:	NORTH	ERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
	e numbe r							
(II KI	iowii)							
Of	ficial Fo	rm 106J						
		J: Your	Exper	ises				12/1
Be a info	as complete a ormation. If m nber (if know	and accurate as nore space is ne n). Answer ever	possible eded, atta ry questio	. If two married people a ach another sheet to this				
Part 1.	Is this a joir	ibe Your House nt case?	hold					
	■ No. Go to							
			in a separ	ate household?				
	□N	0						
	□ Y	es. Debtor 2 mus	st file Offic	ial Form 106J-2, Expense	s for Separate Hous	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D and Debtor 2		■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		17	Yes
					Doughtor		40	□ No
					Daughter		18	■ Yes
								□ No □ Yes
								□ No
								☐ Yes
3.		oenses include		No				
		f people other t d your depende	han $_{\square}$	Yes				
	yourself and	a your aepenae	nts?					
Part		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a sup				apter 13 case to report of the form and fill in the
				government assistance cluded it on Schedule I:				
	icial Form 10		a nave m	oluded it on ochedule i.	rour moome	-	Your exp	enses
4.		or home owners and any rent for th		uses for your residence.	Include first mortgag	je 4. \$;	950.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s. or renter	's insurance		4a. \$ 4b. \$		0.00
	•	•		upkeep expenses		4c. \$		0.00
	4d. Home	owner's associa	tion or con	dominium dues		4d. \$	<u> </u>	0.00
5.	Additional r	nortgage paymo	ents for yo	our residence, such as ho	me equity loans	5. \$	_	0.00

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Debtor 1		Shantell	a D Palmer	Case number (if known)	
6.	Utiliti	ies:			
0.	6a.		, heat, natural gas	6a. \$	110.00
	6b.		wer, garbage collection	6b. \$	0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c. \$	265.00
	6d.	Other. Sp		6d. \$	0.00
7.			ekeeping supplies	7. \$	627.00
8.			children's education costs	8. \$	25.00
9.			lry, and dry cleaning	9. \$	100.00
		•	products and services	10. \$	60.00
		•	ental expenses	11. \$	
11.			Include gas, maintenance, bus or train fare.	Π. φ	0.00
12.			ar payments.	12. \$	300.00
13			clubs, recreation, newspapers, magazines, and boo	·	0.00
14.			tributions and religious donations	14. \$	0.00
		rance.	inbutions and rengious donations	ιπ. ψ	0.00
13.			nsurance deducted from your pay or included in lines 4 of	or 20	
		Life insura		15a. \$	0.00
		Health ins		15b. \$	0.00
		Vehicle in:		15c. \$	110.00
			urance. Specify:	15d. \$	0.00
16			nance. Specify. Include taxes deducted from your pay or included in lines		0.00
10.	Spec		icide taxes deducted from your pay or included in lines	4 01 20.	0.00
17.			ease payments:		0.00
			ents for Vehicle 1	17a. \$	0.00
			ents for Vehicle 2	17b. \$	0.00
		Other. Sp		17c. \$	0.00
		Other. Sp		17d. \$	0.00
18.			of alimony, maintenance, and support that you did	not report as	
	dedu	icted from	your pay on line 5, Schedule I, Your Income (Official	Form 106l). 18. \$	0.00
19.			s you make to support others who do not live with y	ou. \$	0.00
	Spec	cify:		19.	
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of this for	m or on Schedule I: Your Income.	
	20a.	Mortgages	s on other property	20a. \$	0.00
	20b.	Real estat	te taxes	20b. \$	0.00
	20c.	Property,	homeowner's, or renter's insurance	20c. \$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d. \$	0.00
	20e.	Homeown	ner's association or condominium dues	20e. \$	0.00
21.	Othe	r: Specify:	Car Maintenance	21. +\$	40.00
				· ·	
22.		•	monthly expenses		
			through 21.		2,587.00
	22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official I	Form 106J-2 \$	
	22c. /	Add line 22	a and 22b. The result is your monthly expenses.	\$	2,587.00
23.	Calc	ulate vour	monthly net income.		
_2.			12 (your combined monthly income) from Schedule I.	23a. \$	2,889.00
			r monthly expenses from line 22c above.	23b\$	2,587.00
	200.	Sopy your		255. ψ	2,307.00
	23c.	Subtract y	your monthly expenses from your monthly income.		202.22
			t is your monthly net income.	23c. \\$	302.00
٠.	_				
24.			an increase or decrease in your expenses within the		and or degraded because of a
			ou expect to finish paying for your car loan within the year or do you terms of your mortgage?	ou expect your mortgage payment to increa	ase of decrease decause of a
			tomo or your mortgage:		
	■ No		le		
	☐ Ye	es.	Explain here:		

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Elling this inform					
FIII In this infor	mation to identify your	case:			
Debtor 1	Shantella D Palm	-			
Dahtan 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official Forn					
Declarat	ion About a	n Individual	Debtor's Sc	hedules	12/15
	8 U.S.C. §§ 152, 1341, 1 n Below	313, and 3371.			
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. N	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	Ity of perjury, I declare true and correct.	that I have read the sum	nmary and schedules file	ed with this declaratio	on and
X /s/ Sha	ntella D Palmer		X		
Shante	ella D Palmer re of Debtor 1		Signature of	Debtor 2	
Date #	August 22, 2016		Date		

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		nation to identify you				
De	btor 1	Shantella D Paln First Name	ner Middle Name	Last Name		
	btor 2					
` .	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number					Check if this is an mended filing
St Be	as complete a	of Financial A	ble. If two married people a		equally responsible for sup	
		ore space is needed,). Answer every ques		this form. On the top of an	y additional pages, write yo	ur name and case
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	ı Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married■ Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	: all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	<i>ı</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					nity property state or territorico, Texas, Washington and \	
	■ No □ Yes. Mal	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the total	I amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including part e together, list it only once u		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,327.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Shantella D Palmer Document Page 38 of 58 Case number (if known)

			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2015)		■ Wages, commissions, bonuses, tips	\$26,080.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business	
For the calen (January 1 to			■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
gambling List each	and lottery w	vinnings. If yo	nefit payments; pensions; rer u are filing a joint case and yo nme from each source separa	ou have income that you rece	eived together, list it only onc	suits; royalties; and e under Debtor 1.
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January the date you			SSI Benefits	\$5,052.00		
For last caler (January 1 to		31, 2015)	Retirement Distribution	\$147.00		
			SSI Benefits	\$7,579.00		
Part 3: Lis	t Cortain Pa	umants Vall	Made Before You Filed for	Rankruntov		
. Are eithe	r Debtor 1's Neither De	or Debtor 2'	s debts primarily consumer ebtor 2 has primarily consu- personal, family, or househo	r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. § 1	01(8) as "incurred by a
	•	•	re you filed for bankruptcy, di	d you pay any creditor a total	of \$6,425* or more?	
	□ _{No.}	Go to line 7				
	□ Yes	paid that cre not include	ach creditor to whom you pai editor. Do not include paymer payments to an attorney for tl	nts for domestic support oblig his bankruptcy case.	ations, such as child support	and alimony. Also, do
■ Yes.	•	•	on 4/01/19 and every 3 year r both have primarily consu		or after the date of adjustme	nt.
. 55.			re you filed for bankruptcy, di		of \$600 or more?	
	No.	Go to line 7				
	☐ Yes		ach creditor to whom you pai			
			ments for domestic support o for this bankruptcy case.	bligations, such as child supp	oon and allmony. Also, do no	t include payments to

paid

still owe

Case 16-26948 Doc 1 Filed 08/22/16 Entered 08/22/16 17:51:59 Desc Main Document Page 39 of 58 Shantella D Palmer Case number (if known) Debtor 1 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Overland Bond v. Palmer Collection **First Municipal District** Pending On appeal □ Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Creditor Name and Address

Describe the Property

Date

Value of the property

Explain what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

☐ Yes. Fill in the details.

Creditor Name and Address

Describe the action the creditor took

Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

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Par	t 5: List Certain Gifts and Contribution	าร			
13.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total value of more	than \$600 per person	?
	Gifts with a total value of more than \$60 per person Person to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value
	Address:				
14.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or		did you give any gifts or contributions with a to	tal value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrudisaster, or gambling? No Yes. Fill in the details.	iptcy o	r since you filed for bankruptcy, did you lose an	ything because of the	ft, fire, other
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss le the amount that insurance has paid. List ng insurance claims on line 33 of Schedule A/B: erty.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer	s			
16.	consulted about seeking bankruptcy or	prepar	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services requir		rty to anyone you
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Cutler & Associates, Ltd. 4131 Main Skokie, IL 60076		Debtor paid \$310 for filing fee	August 2016	\$0.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Shantella D Palmer

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	☐ Yes. Fill in the details.							
	Person Who Received Tra Address	nsfer	Description and v property transfer		payme	ibe any property or ents received or debts n exchange	Date tra made	nsfer was
	Person's relationship to yo	ou						
19.	Within 10 years before you beneficiary? (These are ofte			ny property to a	ı self-settle	d trust or similar device	of which	you are a
	Yes. Fill in the details.							
	Name of trust		Description and v	alue of the pro	perty trans	sferred		ansfer was
							made	
Par	rt 8: List of Certain Finance	cial Accounts, Inst	truments, Safe Deposi	t Boxes, and S	torage Unit	ts		
20.			, were any financial ac	counts or instr	ruments he	eld in your name, or for	your benef	fit, closed,
	sold, moved, or transferred Include checking, savings, houses, pension funds, cod	money market, or				it; shares in banks, crec	lit unions,	brokerage
	No							
	Yes. Fill in the details.							
	Name of Financial Instituti Address (Number, Street, City, S Code)		Last 4 digits of account number	Type of accordinstrument	unt or	Date account was closed, sold, moved, or transferred		est balance closing or transfer
21.	Do you now have, or did yo cash, or other valuables?	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.							
	Name of Financial Instituti	on	Who else had acc	ess to it?	Describe	the contents	Do vo	ou still
	Address (Number, Street, City, S	~	Address (Number, S State and ZIP Code)		Describe		have	
22.	Have you stored property in	n a storage unit or	place other than your	home within 1	l year befor	re you filed for bankrup	tcy?	
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, S	state and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do yo	ou still it?
_	11 4' B 4 Y		ĺ					
Par	rt 9: Identify Property You	Hold or Control to	or Someone Else					
23.	Do you hold or control any for someone.	property that som	neone else owns? Incl	ude any proper	rty you bori	rowed from, are storing	for, or hol	d in trust
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, S	state and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value
Par	rt 10: Give Details About En	nvironmental Info	rmation					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Shantella D Palmer Debtor 1

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	haz	ardous material, pollutant, contaminant,	or similar term.					
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.							
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	e un	der or in violation of an environme	ental law?		
		No						
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?							
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice		
26.	Hav	re you been a party in any judicial or adm	inistrative proceeding under any env	iron	mental law? Include settlements a	and orders.		
		No Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11:	Give Details About Your Business or (Connections to Any Business					
27.			-	nv o	f the following connections to any	husiness?		
21.	VVII	A sole proprietor or self-employed in		•	· ·	business:		
		_	•		•			
		 □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership 						
	☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting	·	ı				
		No. None of the above applies. Go to P						
	п	Yes. Check all that apply above and fill		s				
	Bu	siness Name	Describe the nature of the business	.	Employer Identification number			
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security r	number or ITIN.		
			·		Dates business existed			
28.		hin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement	to a	nyone about your business? Inclu	ide all financial		
		No Yes. Fill in the details below.						
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued					
_		_						

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Shantella D Palmer

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shantella D Palmer Signature of Debtor 2 Shantella D Palmer Signature of Debtor 1 Date August 22, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received , $\$\underline{\textbf{0.00}}$

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:August 22, 2016	J
Signed:	
/s/ Shantella D Palmer	/s/ David H. Cutler
Shantella D Palmer	David H. Cutler
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amoun	ts are blank. Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Shantella D Palmer		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMP	PENSATION OF ATTOR	RNEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplati	filing of the petition in bankruptcy,	or agreed to be paid	to me, for services re	
	For legal services, I have agreed to accept		s	4,000.00	
	Prior to the filing of this statement I have receive	/ed	\$	0.00	
				4,000.00	
2.	\$310.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed co	ompensation with any other person	unless they are mem	pers and associates of	f my law firm.
	☐ I have agreed to share the above-disclosed composition copy of the agreement, together with a list of the				aw firm. A
6.	In return for the above-disclosed fee, I have agreed t	to render legal service for all aspects	s of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules, c. Representation of the debtor at the meeting of cred. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applications of the secured creditors of the secured credits of the secured creditors of the secured creditors of the secur	statement of affairs and plan which editors and confirmation hearing, an to reduce to market value; exeations as needed; preparation	may be required; d any adjourned hea	rings thereof;	filing of
7.	By agreement with the debtor(s), the above-disclosed	d fee does not include the following	service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	f any agreement or arrangement for	payment to me for re	presentation of the d	ebtor(s) in
_	August 22, 2016	/s/ David H. Cutle	r		
1	Date	David H. Cutler Signature of Attorne	v		
		Cutler & Associat			
		4131 Main Street			
		Skokie, IL 60076 847-673-8600 Fax	x: 847-673-8636		
		david@cutlerltd.c			

Name of law firm

United States Bankruptcy Court Northern District of Illinois

In re	Shantella D Palmer		Case No.	
		Debtor(s)	Chapter 13	
	VE	CRIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	34
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credite	ors is true and correct to	the best of my
Date:	August 22, 2016	/s/ Shantella D Palmer Shantella D Palmer Signature of Debtor		

Accelerated Financial 39 Monette Pkwy Smithfield, VA 23430

Accont Recovery Service 3031 N. 114th At. Milwaukee, WI 53222

Afni, Inc. Attn: Bankruptcy Po Box 3097 Bloomington, IL 61702

Armed Forces Bank PO Box 26744 Kansas City, MO 64196

BMO Harris Financial Advisors, Inc. Attention: BHFA Operations, MC-7 WM 111 E Kilbourn Ave, Suite 200 Milwaukee, WI 53202

Cbe Group 1309 Technology Pkwy Cedar Falls, IA 50613

Chicago County Department POBox 641547 Chicago, IL 60664

Cit y of Chicago Dept. of Business Affairs 121 N LaSalle St. Rm 800 Chicago, IL 60602

City of Chicago Bureua of Parking Bk PO Box 88292 Chicago, IL 60680

Comenity Bank Recovery Department POBOX 182125 Columbus, OH 43218 Comenity Bank 4590 E. Broad St. Columbus, OH 43213

Contract Callers, Inc 501 Greene Street, 3rd Floor Suite 302 Augusta, GA 30901

Elk Grove Rural POBOX 88850 Carol Stream, IL 60188

Harris & Harris 111 W. Jackson Blvd, Suite 400 Chicago, IL 60604

Illinois Dept. of Employment Securi PO Box 6996 Chicago, IL 60606-6996

Illinois Secretary of State c/o Bankruptcy Dept. 213 State Capitol Springfield, IL 62756

Jcitron Law 120 W Madison St Chicago, IL 60602

Markoff Krasny 29 N Wacker Dr. #550 Chicago, IL 60606

Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123

National Credit Adjusters PO Box 3023 Hutchinson, KS 67504-3023

National Credit Solutions 3680 E I-240 SVC Rd. Oklahoma City, OK 73135

Nco Financial Systems, 600 Holiday Plaza Dr Ste Matteson, IL 60443

New Age Furniture Att. Bk Dept 4238 S Cottage Grove Chicago, IL 60653

Overlnd Bond 4701 W. Fullerton Ave. Chicago, IL 60639

Penn Credit 916 S 14th St. Harrisburg, PA 17108

Penn Credit POBox 1259 Dept. 91047 Oaks, PA 19456

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Portfolio Recovery Associates LLC POBox 12914 Norfolk, VA 23541

Salute/utb Card Services Po Box 105555 Atlanta, GA 30348

South Shore Hospital 8012 S Crandon Chicago, IL 60617

The Illinois Tollway 2700 Ogden Ave. Downers Grove, IL 60515

True Accod 153 Maiden Lane, Third Floor San Francisco, CA 94108

Wfnnb Attention: Bankruptcy Po Box 182685 Columbus, OH 43218

WFNNB Bk Dept. 120 Corporate Blvd. Ste. 1 Norfolk, VA 23502